



Funding the Republic

**PURCHASE ORDER**  
**BUREAU OF THE TREASURY**  
 Intramuros, Manila  
 Telefax No.: 524-7008



Supplier : <b>EPITAX CLARO PHILIPPINES, INC.</b>		P.O. No. : <b>2024-12-0204</b>			
Address : Bldg. 5 Phase 2, Kengian Complex Lot 454 Narra Road, Brgy. San Vicente, San Pedro, Laguna		Date : December 19, 2024			
Contact No.: 02 8478-8339		Mode of Procurement : Negotiated Procurement			
Email Add.: <a href="mailto:info@clarophil.com">info@clarophil.com</a>					
TIN: 009-108-488-000					
Gentlemen: Please proceed with the Supply and Delivery of Panel Downlight in the amount of Php58,800.00 (VAT inclusive) following the terms and conditions contained herein:					
Place of Delivery : Ayuntamiento Building, Intramuros, Manila Date of Delivery: -		Delivery Term: Within Thirty (30) calendar days from the receipt of approved PO Payment Term : 30 days			
<b>Stock/ Property No.</b>	<b>Unit</b>	<b>Description</b>	<b>Quantity</b>	<b>Unit Cost</b>	<b>Amount</b>
	lot	<b>SUPPLY AND DELIVERY OF PANEL DOWNLIGHT</b> , composed of the following:	1	-	-
	units	Panel Downlight  ---Nothing Follows---	60	980.00	58,800.00
		Reference: PR No. 2024-12-0430 For the FMD			
		<b>TOTAL</b>			<b>58,800.00</b>
<b>(Total Amount in Words): FIFTY-EIGHT THOUSAND EIGHT HUNDRED PESOS AND (00/000)</b>					
<p>In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p>Conforme:</p>    <p>_____</p> <p>Signature over Printed Name of Supplier</p>    <p>_____</p> <p style="text-align: center;">Date</p> </div> <div style="width: 45%;"> <p>Very truly yours,</p>    <p style="text-align: center;"><b><u>ATTY. RAYMUNDO U. TAN (Sgd.)</u></b></p> <p>Signature over Printed Name of Authorized Official</p>    <p style="text-align: center;">Director III, Administrative Service Designation</p> </div> </div>					
Fund Cluster : _____ Funds Available : _____  <p style="text-align: center;"><b><u>ROWENA R. GAMBA (Sgd.)</u></b></p> <p style="text-align: center;">Signature over Printed Name of Chief Accountant/Head of Accounting Division/Unit</p>			ORS/BURS No. : _____ Date of the ORS/BURS: _____ Amount : _____		